

UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018)				TRANSCRIPT ORDER Please use one form per court reporter. <i>CJA counsel please use Form CJA24</i> Please read instructions on next page.					COURT USE ONLY DUE DATE:						
1a. CONTACT PERSON FOR THIS ORDER Chris Meier				2a. CONTACT PHONE NUMBER (415) 268-6052			3. CONTACT EMAIL ADDRESS cmeier@mofo.com								
1b. ATTORNEY NAME (if different) Rose S. Lee				2b. ATTORNEY PHONE NUMBER (213) 892-5355			3. ATTORNEY EMAIL ADDRESS roselee@mofo.com								
4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) MORRISON & FOERSTER LLP 707 Wilshire Boulevard Los Angeles, California 90017-3543				5. CASE NAME DOE 1 et al v. GitHub, Inc., et al.					6. CASE NUMBER 22cv06823-JST						
				8. THIS TRANSCRIPT ORDER IS FOR:											
7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ <input type="checkbox"/> FTR Irene Rodriguez				<input type="checkbox"/> APPEAL <input type="checkbox"/> CRIMINAL <input type="checkbox"/> In forma pauperis (NOTE: Court order for transcripts must be attached) <input type="checkbox"/> NON-APPEAL <input checked="" type="checkbox"/> CIVIL CJA: <u>Do not use this form; use Form CJA24.</u>											
9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested), format(s) & quantity and delivery type:															
a. HEARING(S) (OR PORTIONS OF HEARINGS)				b. SELECT FORMAT(S) (NOTE: ECF access is included with purchase of PDF, text, paper or condensed.)					c. DELIVERY TYPE (Choose one per line)						
DATE	JUDGE (initials)	TYPE (e.g. CMC)	PORTION If requesting less than full hearing, specify portion (e.g. witness or time)	PDF (email)	TEXT/ASCII (email)	PAPER	CONDENSED (email)	ECF ACCESS (web)	ORDINARY (30-day)	14-Day	EXPEDITED (7-day)	3-DAY	DAILY (Next day)	HOURLY (2 hrs)	REALTIME
05/04/2023	JST	Motion		●	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
				○	○	○	○	○	○	○	○	○	○	○	○
10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC:															
ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional).											12. DATE				
11. SIGNATURE /s/ Rose S. Lee											05/04/2023				

Clear Form

Save as new PDF